ALLOWANCE HOT LIST

10/200 736	Kllgcf
Appl. No. <u>09/857</u> , 735 Examiner-TC <u>Merey</u>	Date / 26-05
Examiner 10	
•	
JACKET:	
YES NO Primary Examiner box complete. YES NO Issuing Classification complete.	
5	
PTO-892/1449:	
	1. Lines are lied for each item cited by applicant
XES NO Examiner's initials or cross-throug XES NO Date(s) supplied/complete on all F	th lines supplied for each item cited by applicant. TO-1449/892 sheets. (Month and year required.)
SPEC:	
XES NO Brief Description of Drawings i	ncludes description of each figure in drawings.
YES NO Continuing data is mentioned in	1 1st paragraph. (Can be an insert.)
CLAIMS:	
YES NO Claims listed on Notice of Allowa	bility match allowed claims and/or index of claims.
YES NO Claims correctly numbered in inde	ex.
(No duplicate or missing (No incorrect dependence	claim numbers.)
(140 monton depondence	,
CRFE: YES NO If necessary (biological sequenc	e listino)
YES NO If necessary (biological sequence	, , , , , , , , , , , , , , , , , , ,
NOTICE OF ALLOWABILITY:	
VES NO Either Box No. 3 (drawings accepted	ed) or Box No. (corrected drawing request) has
been checked.	